

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form T-1
June 2000
Form must be Typed
Form must be Signed
All blanks must be Filled

REQUEST FOR CHANGE OF OPERATOR
TRANSFER OF INJECTION OR SURFACE POND PERMIT

² DOR 103271 RECEIVED

Check Applicable Boxes:

☒ Oil Lease: No. of Wells 1 **NOV 06 2001**

☐ Gas Lease: No. of Wells 0

** Side Two Must Be Completed.

KCC WICHITA

☐ Saltwater Disposal Well - Docket No. _____

Spot Location: _____ feet from N / S Line

_____ feet from E / W Line

☐ Enhanced Recovery Project Docket No. _____

Entire Project: ☐ Yes ☐ No

Number of Injection Wells 0 **

Field Name: CARROLL

Effective Date of Transfer: NOVEMBER 1, 2001

Lease Name: CONNOR "A"

_____ Sec. 21 Twp. 17S R. 14 ☐ E ☒ W

Legal Description of Lease: _____

N/2 NW/4 SEC. 21-17S-14W

County: BARTON

Production Zone(s): ARBUCKLE

Injection Zone(s): _____

Surface Pond Permit # _____
(API # If Drill Pit)

_____ feet from N / S Line of Section

_____ feet from E / W Line of Section

Identify:

☐ Emergency Pit

☐ Burn Pit

☐ Storage Pit

☐ Drill Pit

Past Operator's License No. 5290 ✓

Contact Person: ORVIE HOWELL

Past Operator's Name & Address: HINKLE OIL COMPANY

Phone: (316) 267-0231

150 N. MAIN, STE. 1016, WICHITA, KS 67202

Date: NOVEMBER 1, 2001

Title: GENERAL MANAGER

Signature: Orvie Howell

New Operator's License No. 3911 ✓

Contact Person: ROBIN L. AUSTIN

New Operator's Name & Address: RAMA OPERATING CO. INC.

Phone: (620) 234-5191

101 S. MAIN ST., STAFFORD, KS 67578

Oil / Gas Purchaser: NCRA

Date: 11-1-01

Title: SECRETARY-TREASURER

Signature: Robin L. Austin

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pond permit # _____ has been noted, approved and duly recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation Commission records only and does not convey any ownership interest in the above injection well(s) or pond permit.

_____ is acknowledged as the
new operator and may continue to inject fluids as authorized by
Docket # _____ Recommended action: _____

Date: _____

_____ Typed Signature

3/12/02 MAR 13 2002 3/02

_____ is acknowledged as the
new operator of the above named lease containing the surface pond
permitted by # _____

Date: _____

_____ Authorized Signature

* Lease Name: CONNOR "A" * Location: N/2 NW/4 SEC. 21-17S-14W

A separate sheet may be attached if necessary

* When transferring a unit which consists of more than one lease please file a separate side two for each lease. If a lease covers more than one section please indicate which section each well is located.